

PLEASE TYPE OR USE BLACK INK ONLY

Form 1002A
Rev 1979

(To be filed within 30 days after drilling is completed)

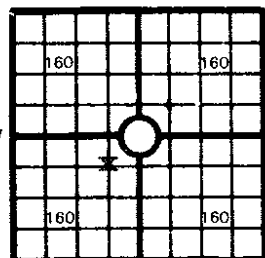
OKLAHOMA CORPORATION COMMISSION
OIL AND GAS CONSERVATION DIVISIONOTC COUNTY
LEASE NO.

Jim Thorpe Building / Oklahoma City, Oklahoma 73105

API NO.

07122836

640 Acres

LOCATE WELL CORRECTLY
AND OUTLINE LEASECOUNTY Kay SEC 9 TWP 27N RGE 5ECOMPANY OPERATING Gray Horse Properties, Inc.OFFICE ADDRESS 50 Penn Place - Suite 380TOWN Oklahoma City STATE/ZIP OK. 73118FARM NAME Conklin WELL NO 9-3DRILLING STARTED 6-7 19 84 DRILLING FINISHED 6-20 19 84DATE OF FIRST PRODUCTION - COMPLETED -WELL LOCATED 1/4 C NE SW 1/4

1980 FT. FROM SL OF 1/4 SEC & 1980 FT. FROM WL OF 1/4 SEC

ELEVATION 1103' GROUND 1093'

TYPE COMPLETION

Single Zone _____ Order No. _____

Multiple Zone _____ Order No. _____

Commingled _____ Order No. _____

LOCATION EXCEPTION

Order No. _____ Penalty _____

OIL OR GAS ZONES

Name	From	To	Name	From	To

CASING & CEMENT

Casing Set				Csg Test	Cement		
Size	Wgt.	Grade	Feet	Psi	Sax	Fillup	Top
10 3/4"	40.5	L.S.	235		150	235'	0
7 7/8"	29	L.S.	3460	4000	140	1660'	1800'

TOTAL DEPTH 4571'

PACKERS SET

Depth 3416'Make Arrow Compression Packer

(OVER)

COMPLETION & TEST DATA BY PRODUCING FORMATION

	1	2	3
FORMATION	Arbuckle SWD		
SPACING & SPACING ORDER NO.	SWD 259431	10609	
CLASSIFICATION (Oil; Gas; Dry; Inj. Well)	SWD		
PERFORATED	Open Hole		
INTERVALS			
ACIDIZED?	Yes		
FRACTURE TREATED?	No		

INITIAL TEST DATA

Date			
Oil-bbl./day			
Oil Gravity			
Gas-Cu. Ft./day	CF	CF	CF
Gas-Oil Ratio Cu. Ft./Bbl.			
Water-Bbl./day			
Pumping or flowing			
CHOKE SIZE			
FLOW TUBING PRESSURE			

A record of the formations drilled through, and pertinent remarks are presented on the reverse.

(OVER)

I, the undersigned, being first duly sworn upon oath, state that this well record is true, correct and complete according to the records of this office and the best of my knowledge and belief.

Telephone 405/842-0398 Thomas G. Lamb, President

Name and title of representative of company

Subscribed and sworn before me this 1st day of October, 19 84My commission expires 6-10-86 Margaret H. Jones
Notary Public

WELL NO 9-3

PLEASE TYPE OR USE BLACK INK ONLY

(RULE 3-205) FORMATION RECORD

10609

Give formation names and tops, if available, or descriptions and thickness of formations drilled through. Show intervals cored or drillstem tested.

[illegible]

REMARKS: _____